

Prescription Drugs

How Does My Outpatient Prescription Drug Program Work?

For COVA Care Members

Your prescription drug benefit under the COVA Care Plan is administered by Medco Health Solutions, Inc., with a three-tier copayment structure. This means that medications are categorized based primarily on their cost. Tier 1 drugs are typically generics. Tier 2 generally includes low to medium-cost brand-name drugs. Tier 3 includes higher-priced brand-name drugs. To use your benefit, just present your Medco ID card at a participating retail pharmacy, or order your medication through the **Medco Health Home Delivery Pharmacy Service™**. Copayment levels are as follows:

For up to a 34-day supply of a prescription obtained at a participating retail pharmacy:

Tier 1	Tier 2	Tier 3
\$15.00	\$20.00	\$35.00

For up to a 90-day supply of a prescription obtained through the Home Delivery Pharmacy Service:

Tier 1	Tier 2	Tier 3
\$30.00	\$40.00	\$70.00

Note: If your prescription costs less than the copayment amount, you just pay the cost of the prescription, and the copayment amount will not apply.

You may determine a drug's tier level or obtain a Home Delivery Pharmacy Service order form by contacting Medco Health Solutions at **1-800-355-8279** or by going to its Web site at **www.medcohealth.com**.

With your first order, please be sure to complete the *Health, Allergy, and Medication Questionnaire*. Refills may be ordered by phone or online.

The COVA Care Outpatient Prescription Drug Benefit is a **mandatory generic** program. This means that if a participant purchases a brand-drug that has a generic equivalent, he/she must pay the applicable copayment plus the difference between the cost of the generic and the brand.

For Advantage 65 and Medicare Complementary Option I Members

Your prescription drug benefit is administered by Anthem Blue Cross and Blue Shield, which manages the program at Medco Health. To use your benefit, just present your Anthem ID card at a participating retail pharmacy, or order your medication through the *Medco Health Home Delivery Pharmacy Service*. Copayment levels are as follows:

For prescriptions obtained at a participating retail pharmacy:

Advantage 65

For up to a 34-day supply	For a 35 to 90-day supply
\$27.00	\$54.00

Option I

For up to a 34-day supply	For a 35 to 90-day supply
\$22.00	\$44.00

For a 35 to 90-day supply of prescriptions obtained through the Home Delivery Pharmacy Service:

Advantage 65	Option I
\$32.00	\$27.00

You may obtain a Home Delivery Pharmacy Service order form by contacting Anthem Member Services or by printing a copy from the Anthem Web site at **www.anthem.com**. With your first order, please be sure to complete the *Health, Allergy, and Medication Questionnaire*. Refills may be ordered by phone or through the Medco Health Web site at **www.medcohealth.com**.

The Advantage 65 and Option I drug benefits are **mandatory generic** programs. This means that if a participant purchases a brand-name drug that has a generic equivalent, he/she must pay the applicable copayment plus the difference between the cost of the generic and the brand.

Note: If your prescription costs less than the copayment amount, you just pay the cost of the prescription, and the copayment amount will not apply.

For Medicare Supplemental Option II Members

Option II prescription drug benefits are administered by Anthem Blue Cross and Blue Shield, which manages the program at Medco Health. Option II members pay 20% (of the allowable charge) coinsurance once a \$200 annual deductible is met. Participants

who use a participating pharmacy should present their ID card at the time of purchase. Participating pharmacies will automatically file your claim. Generally, by using a participating pharmacy, you will save up to 15% for brand-name drugs and even more for generics. Your reimbursement will be mailed to your address of record.

If you use a non-participating pharmacy or fail to present your card at a participating pharmacy, you must file your own claim for reimbursement with Medco Health, and you will not receive any available discount. Claim forms may be obtained by calling Anthem or by printing a form from their Web site at **www.anthem.com**.

Option II members do not currently have a home delivery option.

For Kaiser Permanente HMO Members

Kaiser offers a generic program. (Brand-name drugs are covered only when a generic equivalent is not available or when a physician prescribes it.) Copayment levels are as follows:

Kaiser On-Site Pharmacy	\$10 for up to a 60-day supply
Community Pharmacy	\$20 for up to a 60-day supply
Mail Service	\$8 for up to a 90-day supply

Please consult your Member Handbook or Kaiser Member Services for additional information.

Are There Drugs That Require Approval in Advance?

The COVA Care, Advantage 65, and Option I Plans require review of selected drugs before a benefit may be authorized. You or your doctor may obtain a list of drugs that require special approval or a Drug Prior Authorization Form by contacting either Anthem Member Services (for Advantage 65 or Option I) or Medco Member Services (for COVA Care) or going to their respective Web sites. Drug Prior Authorization forms must be signed by the prescribing physician.

Are There Drugs That Have Quantity Limitations?

Some drugs do have limitations on quantities dispensed within designated time frames. You or your doctor may check on any quantity limitations by contacting either Anthem Member Services (for Advantage 65 or Option I) or Medco Member Services (for COVA Care) or by going to their respective Web sites.

How Can I Reduce My Out-of-Pocket Expense for Prescription Drugs?

Use generic drugs whenever possible. When a generic equivalent is available for your prescribed medication, discuss its possible use with your physician. The decision to use a generic is between you, your doctor, and your pharmacist, but using generics will reduce your out-of-pocket expense. In some cases, use of generics can also reduce the cost to the program, thereby helping to control premium costs.

Use the Home Delivery Pharmacy. Generally, for COVA Care, Advantage 65, and Option I members, out-of-pocket costs will be lower when using home delivery since copayment levels are lower under this program. Also, once you have submitted your initial prescription for a 35 to 90-day supply, arranging for refills is as easy as a phone call or a few clicks at the Medco Web site.

Use Participating Pharmacies. For COVA Care, Advantage 65 and Option I members, using participating pharmacies ensures that you will not have to pay an amount above the allowable charge. Also, by using a participating pharmacy, you will not be required to file a claim.

For Option II members, using participating pharmacies generally provides a discounted price for covered drugs. In addition, participating pharmacies will automatically file your claim.

Is the Home Delivery Pharmacy Service Safe?

Prescriptions ordered through the *Medco Health Home Delivery Pharmacy Service* are mailed in protective shock and tamper-resistant packages with no indication that medications are enclosed. Dispensing systems are utilized to assist pharmacists in filling each prescription accurately and efficiently. The *Medco Health Home Delivery Pharmacy Service* uses the same database to verify eligibility and monitor drug utilization as the retail pharmacies, and the *Medco Health Home Delivery Pharmacy Service* is subject to the same degree of regulation and scrutiny as retail pharmacies.

The *Medco Health Home Delivery Pharmacy Service* has developed special processes for handling and shipping medications that are temperature sensitive.

Medco Health has identified those medications that may lose potency when exposed to extreme temperatures. While housed in Medco Health pharmacies, medications that are sensitive to heat are kept in refrigerated areas and, when mailed, they are placed in special insulated packages with gel packs designed to maintain the correct temperature.

Are My Diabetes Supplies Covered Under My Prescription Drug Program?

Insulin, syringes, and lancets are covered under your prescription drug program. This means that you can get those supplies at your participating pharmacy by paying the appropriate copayment. (Like the Option II prescription drug benefit process, Option II members will pay the cost of these supplies, but participating pharmacies will file your claim for you.)

However, insulin pumps, home glucose blood monitors, and blood glucose test strips are covered as medical services. This means that you must pay for these supplies and then file a claim for benefits using the Anthem Claim Form.

For more information, consult your Member Handbook or contact your prescription drug plan claims administrator at:

<i>Advantage 65, Option I and Option II members</i>	<i>Call or Visit the Website:</i>
Anthem Blue Cross and Blue Shield	Member Services: 1-804-355-8506 in Richmond 1-800-552-2682 outside of Richmond <u>www.anthem.com</u> <u>Once at the site, select “Virginia”. Scroll down to the “Commonwealth of Virginia” link.</u>
<i>COVA Care Members</i>	<i>Call or Visit the Website:</i>
Medco Health Solutions, Inc.	Member Services: 1-800-355-8279 <u>www.medcohealth.com</u>
<i>Regional Plan</i>	<i>Call or Visit the Website</i>
Kaiser Permanente HMO	Member Services: 1-800-777-7902 <u>http://my.kaiserpermanente.org/mida/commonwealthofvirginia/</u>